	0987381.7													
	J								Application or Docket Number					
	PATENT	APPLICATION Effect	ON FEE D	RD		4	50	117-	0 337					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								AALL E	МТІТУ	OR	OTHER SMALL	R THAN		
TOTAL CLAIMS			19			i		RATE	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		-	BASIC FEE 355.00			BASIC FEE	 		
TOTAL CHARGEABLE CLAIMS			/ 4 minus 20=		•		-	X\$ 9=			3/242			
INDEPENDENT CLAIMS			7 _minus 3 =		•		┢	X40=		OR				
MULTIPLE DEPENDENT CLAIM PE			RESENT			$\neg \neg \neg$	\vdash			OR	X80=	ļ		
* If the difference in column 4 is less than 1 is 1							Ŀ	+135=		OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2							1	TOTAL		OR	TOTAL	70		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							MALL	ENTITY	OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA	ı	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 19	Minus	••		s	,	X\$ 9=		OR	X\$18=			
	Independent	1. 2	Minus	***		=		X40=		OR	X80=			
<u> </u>	FIRST PRESE	DLTIPLE DEI	PENDENT	CLAIM			135=		OR	+270=				
							Ľ	TOTAL			TOTAL			
		(Column 1)		(Colum	nn 2\	(Column 3)	ADI	DIT. FEE	L	OR'	ADDIT. FEE			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	EST BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		=	\[\right\]	(\$ 9=		OR	X\$18=			
	Independent	NTATION OF MI	Minus	***	CI AIBA	=		(40=		OR	X80=			
	. A OT THEOL	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						135=		OR	+270=			
								TOTAL NT. FEE		OR ,	TOTAL ADDIT, FEE			
(Column 1) (Column 2) (Column 3)														
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	ER USLY	PRESENT EXTRA	Я	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	44		=	X	\$ 9=		OR	X\$18=	;		
	Independent	*	Minus	•••		=	-	40=		ľ	X80=			
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM		-			OR				
* If the enter in enterm 1 is less than the enter in column 2 write 102 in column 2											+270=			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE TOTAL ADDIT. FEE TOTAL ADDIT. FEE TOTAL ADDIT. FEE TOTAL ADDIT. FEE ""If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

FORM PTO-875 (Rev. 8/00)